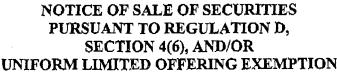
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FORM D

1254 396

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



OMB APP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated aven	age burden
hours per respo	

SEC	USE ON	LY
Profiv		Serial
DAT	FRECEIV	FN

Name of Offering (check if th	is is an amendment and name has	changed, and ind	icate change.)		
Spin Maps, Inc.					***
Filing Under (Check box(es) that	apply): Rule 504 Rule 50)5 ⊠ Rule 506	☐ Section 4(6)	ULOE	
Type of Filing: New Filing	☐ Amendment	:			
	A. BASIC IDENTI	FICATION DA	ra li la		Dagid
1. Enter the information requested					
Name of Issuer (check if this	s an amendment and name has ch	anged, and indica	ite change.)		
Spin Maps, Inc.					
Address of Executive Offices	(Number and Street, City	, State, Zip Code) Telephone Num	ter (Including Area (Code)
679 E. 2nd Avenue, Durango	CO 81301			<u> </u>	
Address of Principal Business Ope		, State, Zip Code			Code)
(if different from Executive Office	es) Same as above.		Same as abou	ve.	
Brief Description of Business			/33 ³ //		
Design, produce, and sell sh	aded relief maps.	(<< jul 1 8	3 2003 >>	
			0000 0		
Type of Business Organization			1.53 J		
☑ corporation	☐ limited parmership, alread	y formed	other pleas	Specific A	recept
☐ business trust	☐ limited partnership, to be f	ormed	□ omer (pieas	specify) pROC	, <u> </u>
	<u> </u>	fonth Year		/ 1111 1	6003 n
Asturbay Estimated Data of Inne-	- anation or O-mariantian	0 0 0	57) i	י איני ייי	
Actual or Estimated Date of Incor Jurisdiction of Incorporation or Or		Postal Service al		DEstimated	OMSON
and a most potation of O	CN for Canada; FN for				TOIACR.

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a preconcition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

有性 - 1.全国电压器 121.电影的影響機能	New Feet drug 19	A. DACKE MARNION	FICATION DATA	and Admin	新考的基本制度的 表现
2. Enter the information reques			REAVE VILLUA FAMES	<u> </u>	The state of the s
• Each promoter of the iss	*	_	within the past five year	rs;	•
 Each beneficial owner has securities of the issuer; 	wing the pow	er to vote or dispose, or	direct the vote or dispo	sition of, 10% o	r more of a class of equity
Each executive officer an	d director of c	orporate issuers and of	corporate general and ma	maging partners	of partnership issuers; and
• Each general and manag		=	, C		
Check Box(es) that Apply:		Beneficial Owner	⊠ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Hannum, Neil		. <u> </u>			
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		
679 E. 2nd Avenue, Durang	o, CO 8130)1			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	⊠ Executive Officer	⊠ Directo	General and/or Managnig Partner
Fall Name (Last name first, if in Hickcox, Kris	idividual)				
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		
679 E. 2nd Avenue, Duranc					
Check Box(cs) that Apply:	Promoter	Beneficial Owner	⊠ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if it	idividual)				
Stroud, Mark					
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		
679 E. 2nd Avenue, Durang	io, CO 8130	11			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Parmer
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
Business or Residence Address	(Number and	Street, City, State, Zip	Code)		

		17 () () () () () () () () () (B. IN	ORMAT	TON ABO	ULOFF	ERING				
l Hasth	c issuer so	old, or doe	s the issue	r intend to	sell, to no	on-accredi	ted invest	ors in this	offering?			Yes No □ ⊠
1. 1145 41	C 133401 34	na, or doo				ix, Colum			_			
2. What i	is the mini	mum inve				-	•	-				\$ 150,001_
												Yes No
3. Does t	he offerin	g permit jo	oint owner	ship of a	ingle unit	?			• • • • • • • • • • • • • • • • • • • •		***********	
sion or to be li list the	similar rested is an name of t	ation reque muneration associated he broker by set forth	for solicit person or or dealer.	ation of pragent of a agent of a	archasers in broker of an five (5)	n connection dealer re persons t	on with sai gistered w to be listed	les of secur ith the SE	rities in the C and/or v	offering.	If a perso or states	n \$,
Full Name (Last name	e first, if in	idividual)									
Business or	Residence	e Address	(Number a	and Street	, City, Sta	te, Zip Co	de)					
Name of As	sociated E	Broker or I	Dealer									
States in Wi		n Listed H					•			· ·		☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[עד]	[VT]	[VA]	[WA]	[WV]	[WJ]	[WY]	[PR]
Full Name (Last name	e first, if in	dividual)	·			, , , , , , , , , , , , , , , , , , , 					
Business or	Residence	Address	(Number 8	and Street,	City, Star	te, Zip Co	de)					
Name of As	sociated E	Proker or I	Dealer			- 4.7					٠.	
States in Wi	nich Perso All States"	n Listed H or check	las Solicite individual	ed or Inter States)	nds to Soli	cit Purcha	sers		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		******	☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[[[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[wi]	[WY]	[PR]
Full Name (Last name	first, if in	dividual)							•		
Business or	Residence	Address	(Number a	ınd Street,	City, Stat	e, Zip Coo	ie)					
Name of As	sociated E	Broker or I	Dealer									
States in Wi		n Listed H										☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MII]	[NE]	[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange		
	and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$ 1:10,000	\$ 150,000
	Equity	\$0	5.0
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0	\$.0
	Partnership Interests	\$.0	\$0
	Other (Specify Warrants)	\$1	\$1
	Total	\$150,001	\$.150,001
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ 150,001
	Non-accredited Investors	0	\$.0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	To according	Dollar Amount
·	Type of offering	Type of Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		3 \$0
	Printing and Engraving Costs		\$ 0
	Legal Fees.		\$ 15,823.4
	Accounting Fees		₹ \$0
	Engineering Fees		₹ \$0
	Sales Commissions (specify finders' fees separately)		₹ \$0
	Other Expenses (identify) Filing fees		\$ 75
	Total		\$15,898.4

: •	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A		CEUS: Han es Maile
	b. Enter the difference between the aggregate offering price given in response to Part C tion 1 and total expenses furnished in response to Part C - Question 4.a. This different "adjusted gross proceeds to the issuer."	ce is the	\$ 139.926
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposused for each of the purposes shown. If the amount for any purpose is not known, for estimate and check the box to the left of the estimate. The total of the payments listed my the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b	rnish an ust equal	
	Salaries and fees	🖾 <u>\$ 0</u>	<u> </u>
	Purchase of real estate	🛮 🔻 0	<u>⊠\$0</u>
	Purchase, rental or leasing and installation of machinery and equipment	<u> </u>	<u>⊠\$0</u>
	Construction or leasing of plant buildings and facilities	🖾 <u>\$ 0</u>	⊠\$ <u>0</u>
	Acquisition of other businesses (including the value of securities involved in the offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		⊠ \$ <u>0</u>
	Repayment of indebtedness	⊠ <u>\$ 0</u>	⊠ <u>\$</u> 0
	Working capital		⊠ \$ 139,926
	Other (specify):	⊠ <u>\$ 0</u>	⊠\$ 0
		⊠ <u>\$ 0</u>	⊠\$0
	Column Totals	⊠\$ 0	⊠\$ 139,926
	Total Payments Listed (column totals added)	<u>□</u> §_	139,926
	D. FEDERAL SIGNATURE		
foll	e issuer has duly caused this notice to be signed by the undersigned duly authorized personing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities est of its staff, the information furnished by the issuer to any non-accredited investor pure	and Exchange Commi	ission, upon written re
Issu	ner (Print or Type) Signature /	Dat	e
Sni:	n Mans, Inc.		uarv 2003
	me of Signer (Print or Type) Title of Signer (Print or Type)		

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

01/06/2003 10:36 FAX 7196338	J6/2UU3	10:36	FAX	71963	38477
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SPARKS WILLSON

Ø 007

	E STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provision; of such rule?	Yes □	No ⊠
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed Form D (17 CFR 239.500) at such times as required by state law.	, a noti	ice on
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furn issuer to offerees.	ished b	by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the of this exemption has the burden of establishing that these conditions have been satisfied.		

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature / //	Date
Snin Mans. Inc. Name (Print or Type)	Title (Print or Type)	January . 2003
Neil Hannum	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		<u> </u>	3	3 4					
	Intend to sell to non-accredited investors in State (Part B-Item1)		Type of security and aggregate offering price offered in State Type of investor and amount purchased in State		Type of investor and			Disqual under Sta (if yes explan waiver	Sification ate ULOE, attach ation of granted) -ftem 1)
State	Yes_	No	(Part C-Item1) Debt Securities	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Aniount	Yes	No
AL_									
AK									
AZ					-				
AR		·							
CA							·		
CO		X	\$150,001	1	\$150,001	0	\$0		x
CT_									
DE									
DC									
FL		· <u>·</u>							
GA									
HI									
ID				·					
_UL									
IN					·····				
ΙA				·					
KS		<u> </u>							
KY		·					<u> </u>		
LA									
ME	<u>.</u>								
MD									<u> </u>
MA		 							
MI								ļ	
MN		:							
MS								<u> </u>	
MO									

<u>-</u>	· :	, _	3	3 4					5
-	Intend to non-a	to sell ccredited s in State -Iteml)	Type of security and aggregate offering price offered in State (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqual under State (if yes explan waiver	diffication ate ULOE, attach atton of granted) -Item 1)
State	Yes	No	Debt Securities	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Ar.ount	Yes	No
MT									
NE									
NV							· -		
NH									
ŊJ									
NM									
NY									
NC									
ND									
ОН								· .	
ок									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI									
WY									
PR.									